

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 2008

Estimated average burden hours per response . . . 16.00

SEC USE ONLY				
Prefix		Serial		
DATE	DECEN	/FD		
DATE RECEIVED				

Name of Offering (LI check if this is an amendment and name has changed, and indicate change.)  Sale of Series 1 Preferred Stock and the Common Stock issuable upon conversion of Series 1 Preference.	erred Stock.
File Under (Check box(es) that apply): Rule 5(4 Rule 505 Rule 506 Section 4(6)	
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer ( check if this is an amendmen: and name has changed, and indicate change.)	07087243
Asempra Technologies, Inc.	Transaction Number (feetballing According
Address of Executive Offices (Number and Street, C ty, State, Zip Code)  3200 Patrick Henry Drive, Santa Clara, CA 95054	Telephone Number (Including Area Code) (408) 215-5800
	<u>  `                                   </u>
Address of Principal Business Operations (Number at d Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Same as above.	Same as above. PROCESSED
Brief Description of Business	· IOOE39EI
Real-time data recovery management software.	Ø JAN 14 2000
Type of Business Organization  Corporation  business trust  Imited partnership, already formed  timited partnership, to be formed	r (please specify): FHOMSON FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:	Actual Estimated  other foreign jurisdiction) D E
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regula et seq. or 15 U.S.C. 77d(6).	ation D or Section 4(6), 17 CFR 230.501
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offe U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at that address after the date on which it is due, on the date it was mailed by United States registered or certain the date of the date	the address given below or, if received at
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 2	20549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be ma signed must be photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only reany changes thereto, the information requested in Part C, and any material changes from the information Part E and the Appendix need not be filed with the SEC.	eport the name of the issuer and offering, on previously supplied in Parts A and B.
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for shave adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate not	sales of securities in those states that ice with the Securities Administrator in

## **ATTENTION**

each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The

Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENTI	IFICATION DATA					
2. Enter the information requ	ested for the follo							
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>								
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
Each executive office	<ul> <li>Each executive officer and director of corpc rate issuers and of corporate general and managing partners of partnership issuers; and</li> </ul>							
Each general and ma	naging partner of p	partnership issuers.			·			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner			
Full Name (Last name first, if i Gysin, Gary	individual)							
Business or Residence Address		-						
c/o Asempra Techn	ologies, Inc., 3200	Patrick Henry Drive, S						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner			
Full Name (Last name first, if in Eubanks, Gordon	individual)							
Business or Residence Address	(Number and Stre	eet, City, State, Zip Code)						
c/o Asempra Techno	ologies, Inc., 3200	Patrick Henry Drive, S	anta Clara, CA 95054		. <u> </u>			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if Gannon, John	individual)							
Business or Residence Address	Number and Stre	et City State Zin Code)			-			
	•	reet. Suite 3350, Waltha						
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Krausz, Steve								
Business or Residence Address c/o U.S. Venture Pa		eet, City, State, Zip Code) I Hill Road , Menlo Park						
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)		<del></del>	•				
Perkins, Sonja Hoe								
Business or Residence Address	(Number and Stre	eet, City, State, Zip Code)	)	-				
c/o Menlo Ventures	, 3000 Sand Hill I	Road , Building 4, Suite	100, Menio Park, CA 940	25				
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)							
Fraisi, Daniel J.								
Business or Residence Address 13500 Saraview Dri		•	•					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if Sim-Tang, Siew	individual)							
Business or Residence Address (Number and Street, City, State, Zip Code) 10435 Sterling Blvd., Cupertino, CA 95)14								
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, if	individual)				managing tartici			
Bagby, Mark								
Business or Residence Address c/o Asempra Techn		eet, City, State, Zip Code) Patrick Henry Drive, S						

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ☐ Director ⊠ Beneficial Owner ☐ Executive Officer General and/or Check Box(es) that Apply: □ Promoter Managing Partner Full Name (Last name first, if individual) U.S. Venture Partners VIII, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 2735 Sand Hill Road, Menlo Park, CA 94025 Beneficial Owner Check Box(es) that Apply: ☐ Promoter ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Menlo Ventures X, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 3000 Sand Hill Road, Building 4, Suite 100, Menlo Park, CA 94025 □ Director □ Promoter Executive Officer ☐ General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Polaris Venture Partners IV, L.P. Business or Residence Address (Number and Street, City, State, Zip Code) 1000 Winter Street, Suite 3350, Walthani, MA 02451 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or [] Beneficial Owner ☐ Executive Officer □ Director Check Box(es) that Apply: ☐ Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter [] Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

					B. INFOR	MATION	ABOUT O	FFERING				
1. Has	the issuer	sold, or do	es the issu					in this offe	_		••••	Yes No □ ⊠
2. Wha	at is the mi	nimum inv	estment th	nat will be	accepted f	rom any ind	dividual?				\$ <u>N</u>	/A
						-						Yes No
com If a or st	mission or person to b ates, list th	similar rei e listed is ne name of	muneratio an associa the broke	n for solic ated persoi r or dealer	ntation of p n or agent of . If more t	ourchasers i of a broker than five (5)	in connection or dealer re	paid or give on with sales gistered with be listed are y.	s of securition that the SEC a	es in the off ind/or with a	ering. a state	
Full Nam	ie (Last nai N/A	me first, if	individua	1)								
Business	or Resider	nce Addres	s (Numbe	r and Stree	et, City, Sta	ite, Zip Coo	ie)					
Name of	Associated	Broker or	Dealer		_							
						icit Purcha			<u></u> -			
(Check	c "All State	es" or chec	k individu	al States)		••••						All State:
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Business	or Resider	nce Addres	s (Numbe	r and Stree	et, City, Sta	ate, Zip Coo	le)					
Name of	Associated	l Broker o	Dealer									·
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(Checl	k "All State			ĺ					***************************************			All State
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[MT]	[NE]	[NV]	[NH]	[N]]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[W]	[WY]	[PR]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE O	F PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ -0-	\$ -0-
	Equity	\$ 8,707,020.00	\$ 7,760,650.00
	☐ Common ☐ Preferred		_
	Convertible Securities (including warrants)	\$ (See above)	\$ (See above)
	Partnership Interests	\$0-	_ \$
	Other (Specify)	\$0-	\$
	Total	\$ 8,707,020.00	\$ 7,760,650.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number of Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	14	\$ 7,760,650.00
	Non-accredited Investors	-0-	\$ -0-
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$ -0-
	Regulation A	N/A	\$ -0-
	Rule 504	N/A	\$ -0-
	Total	N/A	\$ -0-
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		] \$ -0-
	Printing and Engraving Costs		] \$ ] \$
	Legal Fees	_	<b>:</b>
	Accounting Fees		\$ -0-
	Engineering Fees	_	S -0-
	Sales Commissions (specify finder's fees separately)		\$ -0-
	Other Expenses (identify)		\$ -0-
	Total	_	\$To be determined

	C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES A	ND USE	OF PROCEED	S		
	b. Enter the difference between the aggregat: offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."						
5.	5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b. above.						
				Payments to Officers, Directors, & Affiliates	Payments To Others		
	Salaries and fees		□ <b>s</b>	-0-	<u> </u>		
	Purchase of real estate			-0-	<u>-0-</u>		
	Purchase, rental or leasing and installat	ion of machinery and equipment	□ <b>\$</b>	-0-	S -0-		
	Construction or leasing of plant building	gs and facilities	□ <b>s</b>	-0-	S -0-		
	Acquisition of other business (including offering that may be used in exchange it	the value of securities involved in this		-0-	-0-		
	offering that may be used in exchange f	or the assets or securities of another	s		□ <b>s</b>		
				-0-	□ \$ -0-		
	Working capital		_ s _	-0-	<b>⋈</b> \$ 8,707,020.00		
	• .						
			□ \$	-0-	□ \$ <u>-0-</u>		
			□ \$	-0-	⊠ \$ 8,707,020.00		
		dd::d)		-0-	<b>⋈</b> \$ 8,707,020.00		
	•	,					
		D. FEDERAL SIGNATURE					
The foll of i	issuer has duly caused this notice to be sig owing signature constitutes an undertaking by its staff, the information furnished by the issue	ned by the undersigned duly authorized persor the issuer to filmish to the U.S. Securities and r to any non-accredited investor pursuant to pa	on. If this d Exchang tragraph (b	notice is filed the Commission, (2) of Rule 502	under Rule 505, the upon written request 2.		
Issu	er (Print or Type)	Signature	Da				
Ase	mpra Technologies, Inc.	1 Mach	De	cemper 70	, 2007		
Naı	ne of Signer (Print or Type)	Title of Signer (Phint or Type)	•				
Ga	ry Gysin	President and Chief Executive Officer					

**END**